

FINAL MEETING SUMMARY

HANFORD ADVISORY BOARD

HEALTH, SAFETY AND ENVIRONMENTAL PROTECTION COMMITTEE MEETING

May 11, 2006

Richland, WA

Topics in this Meeting Summary

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This is only a summary of issues and actions in this meeting. It may not represent the fullness of ideas discussed or opinions given, and should not be used as a substitute for actual public involvement or public comment on any particular topic unless specifically identified as such.

Welcome and Introductions

Keith Smith, Chair of the Health, Safety and Environmental Protection (HSEP) Committee, welcomed the committee and introductions were made. Changes to the December meeting summary were incorporated and the summary was adopted.

The purpose of the meeting was to educate the committee about health issues that face Hanford workers and the public, and how those issues affect the environment. Jim Trombold, HSEP Vice-Chair, added that the committee's goal should be to serve as a resource for the Board and the public on health and environmental protection issues.

Beryllium

Charlie Weems, serving as the committee issue manager on Beryllium (Be) issues, provided an introduction on non-radiological issues at Hanford, focusing specifically on Be control. Charlie indicated that Be in the workplace poses a severe health risk to workers, especially the potential for chronic beryllium disease (CBD). He provided a history of Be use at Hanford and the resulting affect on worker health. He said the Be left at Hanford is legacy Be. Berylliosis was not considered a chronic disease until 1973. With technological advancements in the 1980s, Be hypersensitivity became an identified health condition. At Hanford Be exposed workers were divided into three categories: 1) sensitized, 2) sensitized without symptoms, and 3) obviously sensitized and exhibiting obvious clinical disease.

Charlie said he believes some policies need to be developed to protect workers from Be hazards. The Atomic Energy Commission established a 2.0 microgram/meter³ (µg/m³) threshold standard for Be exposure. He noted that the Department of Energy (DOE) deserves credit for recognizing, as early as the late 1900s, that the 2.0 µg/m³ standard concentration for worker exposure was inadequate. As a result, DOE revised the threshold standard to 0.2 µg/m³, which became law (10 CFR 850) in 1999. A joint council was convened to improve implementation of Be exposure protection. However, under 10 CFR 850, all contractors began to implement their own Be programs. For this reason, the Hanford Beryllium Awareness Group (BAG), a group of Be affected workers, is working with DOE to establish proper implementation of a single CBD prevention program. This working group has requested that the Board not issue advice until DOE and the BAG has a chance to implement the programs currently being developed.

Doug Shoop, Department of Energy – Richland Operations Office (DOE-RL), provided an overview of Be related requirements under 10 CFR 850 and the work DOE has been doing with Be affected workers. He noted that 10 CFR 850 is more detailed and protective than Occupational Safety and Health Administration (OSHA) standard requirements. In addition, 10 CFR 850 requires all contractors to develop their own CBD prevention program. He described the worker protection requirements in 10 CFR 850, including Be baseline inventory, hazard assessment, exposure limits, employee exposure monitoring, respiratory protection, personal protective equipment, medical monitoring, training, regulated areas, hygiene facilities and practices, and exposure reduction and minimization.

DOE expects contractors to comply with 10 CFR 850, and is able to penalize non-compliant contractors. The primary focus of DOE oversight is on the evaluation of contractor process and programs. DOE utilizes an integrated evaluation plan, which identifies planned field assessments including a review of work packages and observation of work activities. DOE inspectors provide daily oversight of the implementation of contractor CBD protection programs.

DOE is currently working with the BAG to address Be exposed worker issues and concerns. Keith Klein, DOE-RL – Manager, attended a BAG meeting, which prompted him to issue a DOE apology to Be exposed workers and promise DOE would work with them to understand their issues and needs. BAG representatives met with DOE to present worker issues and concerns, and DOE hired a facilitator to work with the group to make sure their issues were clearly articulated. The group's issues and concerns were well received by DOE-RL. Based on these meetings, DOE-RL wanted the rest of the Hanford field office representatives and contractor heads to hear the same worker issues and concerns. DOE-RL initiated work on some of the group's concerns, but many issues are very challenging to address (e.g., a lack of local physicians that specialize in CBD, which impacts the independent medical evaluation (IME) under the worker compensation program). DOE is also working on developing a medical removal program, which would place Be sensitized workers into jobs where they will not be exposed. DOE has met with senior contractor and medical representatives to discuss the issue. DOE, in consultation with the BAG, drafted DOE medical removal expectations. Doug said the best thing for

workers and the community is to eliminate the Be hazard from the site, which involves decommissioning and demolishing (D&D) Be facilities.

Steve Halterman, BAG Chairperson, indicated the discussion of Be issues are for the committee's information only. DOE and the BAG are currently working to address worker issues and concerns. This represents a unique opportunity to work together to make things right for affected workers now and in the future. This collaboration should also help workers with worker compensation issues.

Regulator Perspectives

- Beth Rochette, Washington State Department of Ecology (Ecology), said Ecology is concerned about any threats to human health and the environment. For its own employees, Ecology encourages any employee concerned about Be exposure in a particular facility to avoid entering that facility. Ecology employees who think they have been exposed to Be are strongly encouraged to go through the site's Be exposure program, as if they were a regular worker on the site.

According to Ecology's air monitoring engineers, Be is not being detected off-site (at concentrations exceeding background). Comprehensive Environmental Response, Compensation and Liability Act (CERCLA) requirements and applicable or relevant and appropriate requirements (ARARs), such as respiratory protection, dust prevention, etc., apply to all facility D&D work.

Ecology has a role in balancing risk in terms of long-term environmental risk and short-term worker risk. Although Ecology receives plenty of long-term risk assessment from DOE, Beth said Ecology has been receiving progressively less information about short-term worker risk, and would like to see more.

Contractor Perspectives

- Phillip Keuhlen, Washington Closure Hanford (WCH) – Acting Director ESH&Q, discussed WCH's CBD prevention program. WCH's program was developed based on 10 CFR 850, and is reviewed and approved by DOE. The general objectives of the program include minimizing airborne exposure, preventing skin contact with contaminated surfaces, preventing the spread of Be surface contamination, and minimizing worker exposure.

As WCH identifies new Be contamination during hazard assessments, those facilities are added to the inventory of Be contaminated facilities. When facilities are transferred from one contractor to another, WCH reviews the transfer materials and documentation. When WCH goes into facilities to execute D&D work, an integrated safety management system is used, which involves reviewing existing site conditions, a walk-down of the facilities, and reviewing industrial hygienist data to identify the relative hazard of a particular facility.

Exposure monitoring is critical to WCH's program. WCH conducts air and wipe sampling, area and personal space monitoring, and surface dust sampling. WCH

believes it is important to make test results available as quickly as possible. Phillip noted that $0.12 \mu\text{g}/\text{m}^3$ was the highest concentration measured over the past year. WCH is doing the best job possible to understand Be hazards based on a combination of historical information and characterization sampling. Mitigation plans are built into work plans, and WCH is doing in-process monitoring to confirm assumptions and ensure controls are effective. When conditions are outside what is expected, WCH stops work to mitigate the hazards.

Phillip said WCH believes worker protection starts with knowledgeable workers, so its focus is on identifying Be hazards and training workers. WCH has a voluntary screening for past exposure and medical surveillance programs for its workers. WCH is very pleased with the ability of its informed work force to identify potential Be hazards.

- David Jackson, Fluor Hanford (FH) - Deputy Vice President of Safety and Health, presented information on FH's CBD prevention program. FH's program started in March 1998 in reaction to an OSHA finding that the Be threshold standard was not protective of workers. When DOE issued 10 CFR 850, FH revised their program's standards to incorporate the requirements in 10 CFR 850. The FH program also involves working with other contractors on worker health issues, establishes requirements, components of requirements, and determines how to manage buildings and handle work where Be may be present. During a facility transfer between contractors, FH provides the facility history and information to other contractors. FH conducts a Be assessment prior to work with Be facilities or equipment.

Under FH's plan, managing Be affected workers includes medical surveillance, medical removal, and worker consent. Workers are required to get a blood test before working in a Be contaminated area, and those workers who test positive are not allowed to work in Be contaminated areas. FH works closely with AdvanceMed Hanford (AMH), who administers Hanford's Medical Support Plan.

FH believes hazard assessment is essential. If a worker is uncomfortable working in a particular building, that worker can be reassigned to a different job. Workers have to self-select and express their own concerns. Be exposure assessments are essential for identifying Be hazards. An industrial hygienist evaluates the work to be done to determine the appropriate level of protection, training, and monitoring that is required. To date, no Be airborne sample results have exceeded the $0.01 \mu\text{g}/\text{m}^3$ FH action limit, and only two Be wipe samples exceeded the $0.2 \mu\text{g}/100\text{cm}^2$ FH action limit. David said airborne Be contamination is of most concern; however, surface Be contamination is an indicator of a level of concern, which prompts additional sampling. If FH receives a reading at or above the action limit, they believe it is worth assessing to determine the potential Be contamination hazard.

Heart of America Northwest (HoANW) Perspectives

- Gerry Pollet, HoANW, provided information on a joint council independent investigation of Be hazards in 2004. He noted that surface Be contamination is a significant concern in terms of worker exposure. One of the main results of the investigation was that sensitized workers were in jobs where they could be exposed to Be (electricians, maintenance workers, etc); however, office workers were also found to be sensitized. This result indicates people were becoming sensitized without being exposed to the $0.2 \mu\text{g}/\text{m}^3$ concentration threshold. He commended FH on their implementation of an action limit of $0.01 \mu\text{g}/\text{m}^3$.

Gerry expressed concern that surface Be contamination could become airborne, and inconsistent monitoring of this possibility could result in exposure to workers. In 2000, DOE's Environment, Safety and Health Program warned all DOE sites that respiratory protection equipment must be used in areas with potential airborne Be contamination. However, some contractors have artificially divided Be contaminated buildings into areas where both Be workers and non-Be workers can work. This is not adequate protection for non-Be workers, since ductwork makes Be exposure a consistent hazard throughout the facility. He suggested Ecology could have additional oversight of worker protection, since there are RCRA permits that are supposed to protect workers from hazards. In addition, Gerry expressed his ongoing concern about the lack of uniform Be protection standards between Hanford contractors. He noted that the joint council recommended there be one site-wide policy for worker protection from Be hazards.

Gerry said legal requirements for medical removal stipulate that a worker testing positive for Be exposure must be offered another job with equal pay, otherwise they are allowed to stay at home and receive pay for up to two years, or until a job is identified. This provides incentive to contractors to locate jobs for these individuals. The 2004 independent review found that medical removal requirements were not being followed.

Committee Discussion

- *Do worker protection requirements vary from site to site?* Doug said requirements do not differ from site to site, but contractors may implement the requirements differently.
- *Has DOE defined an action phase of compliance for contractors? If so, what does the action level require?* Doug explained that if individuals are exposed to Be concentrations above $0.2 \mu\text{g}/\text{m}^3$, then contractors are required to take action, such as putting workers in respiratory protection and developing regulated areas. The contractor also has to evaluate their work activities and analyze the hazards to ensure they are adequately protecting workers. Charlie added that it is important to bear in mind that what constitutes hazardous Be levels remains largely unknown. Steve explained that workers who choose to be tested for Be sensitivity must be escorted to National Jewish Hospital in Denver, because it requires taking a patient to a remote location and the patient is sedated.

- Jim said he is impressed with 10 CFR 850 and the actions taken by DOE to ensure worker protection. However, he noted that increased information and understanding about Be exposure limits may require amendments to current threshold limits and worker protection requirements. The requirements can be as protective as possible, but some people exposed to Be may have a specific biology that makes them more sensitive to Be at much smaller concentrations than the accepted threshold. Charlie added that there are also known genetic cohorts that make people more susceptible to Be.
- *Are Be sensitivity requirements anything like an As Low As is Reasonably Achievable (ALARA) program?* Doug said they are similar, since Be exposure must be kept at $0.2 \mu\text{g}/\text{m}^3$ or the lowest achievable level possible. The goal is to avoid Be exposure completely.
- *Do contractors have clear criteria for treating a building with no known Be hazard?* Phillip said WCH has a characterization program for each building, which is based on using historical records and previous worker interviews.
- Gerry commented that high levels of sampled Be (far above $0.2 \mu\text{g}/\text{m}^3$) were found at the Cougar Building in the 300 Area. *What was done to communicate with potentially exposed individuals?* Phillip said he was not prepared to discuss that particular event, but there are general posting requirements that would restrict personnel that are not Be trained from accessing such facilities. Doug explained that 10 CFR 850 stipulates that Be sensitive workers must be medically removed once the action level or ALARA has been reached. Gerry suggested the committee send a letter to DOE and/or the contractor requesting information about this issue.
- *Gerry asked why there is no uniform policy that stipulates workers cannot enter a facility on the Be facilities list without having an annual Lymphocyte Proliferation Test (LPT)?* He expressed concern about multiple contractor policies regarding Be hazards, and believes workers need to have one consistent site-wide Be policy. David explained that contractors have different Be policies because FH and WCH do different work (FH has some facilities that are still useful, so they need to operate with a lower action level, while WCH is performing D&D on all its facilities, so they operate under a higher action level).
- *Is there a standard requiring Be workers to receive periodic testing?* Steve said there are testing requirements for workers assigned to work in an area with potential Be exposure. Testing includes pre-assignment blood tests to determine that worker is not already exposed and a required annual LPT test.
- *Does a worker who has worked in a Be area get tested after their work in the Be area is complete, or is testing limited to workers actively working in Be areas?* Doug said testing is voluntary after a worker has left a Be area.
- *What is the analytical process used to determine the Be hazard from a wipe test?* Phillip said a combination of surface and airborne sampling is conducted to assess Be concentration levels. Rob Davis commented that an ALARA evaluation pre-considers concentration limits and the work a person is doing to determine if the exposure is above threshold limits. Phillip said similar techniques are used to

evaluate the potential for Be material to become airborne and determine the potential risk for certain types of work. David used an analogy of sand being larger and heavier than powder, and therefore less likely to become airborne. He used this to describe how larger surface Be particles are similarly less likely to become airborne than fine Be particles. For this reason, large Be particles are of less concern. However, he noted that all surface Be particles are included in assessments of surface Be hazards.

- *Are respirators designed to remove Be particle size?* David said respirators do remove Be particles, and are tested to ensure they do.
- *Considering that contractors are hiring a lot of temporary workers, is there any concern that people are being turned away because they test positive for Be sensitivity?* The contractor representatives did not believe a positive Be test would preclude a prospective worker from being hired.
- Gerry commented that the percentage of workers who have been tested for Be sensitivity is very low. The expectation that potentially exposed workers would receive individual letters about their possible exposure and avenues for testing has not been implemented. Steve said there are two workers on permanent medical benefits, which are not being administered correctly. This is one of the issues that is being considered and redefined by DOE and the BAG. David said FH does not test all new workers, but they did conduct a massive information campaign to provide information about exposure and testing. The difference between the number of Hanford workers that are tested and workers that are tested at other DOE sites is partially tied to the work that was performed at the site (i.e., more Be manufacturing activities were conducted at other sites). The Be hazard at Hanford is concentrated in the 300 Area. FH's approach does not mandate worker testing unless workers are going to work in a Be area or have a personal concern about Be exposure.
- *What can former workers do about getting tested if they are concerned they may have worked in a Be contaminated facility?* Steve said workers in the Former Worker Program have access to testing.

Update on Tank Vapors

Susan Eberlein, CH2M Hill (CHG), provided an update on health panel recommendations for taking Tank Farm workers off respirators. The panel consisted of five occupational health experts from across the country, discussing potential concerns about worker health. The panel reviewed historic medical data, worker tasks, and conducted worker interviews to determine concerns.

Based on identified concerns and quantitative data, the panel looked at two medical outcomes: 1) pulmonary, and 2) liver function. The panel discussed its findings with workers. The panel found no large systematic problems causing medical issues, but there are some small things being done that could contribute to potential exposure issues.

For lung function tests, no significant difference was detected between workers spending more time in tanks than workers that spend less time in tanks. However, focusing on smaller groups of workers identified one potential abnormality for workers who spend a lot of time working in the tanks. The panel recommended workers follow-up on annual respiratory tests and contractors implement programs to keep people out of contaminated areas.

Liver enzymes are very sensitive and elevations can be caused by several factors, some of which are associated with occupational health. Tests attempted to determine if there is greater liver enzyme function amongst workers that spend more or less time in tank farms. Tests were administered across several groups, and no difference in enzyme function was detected. Some workers with more exposure to tank farms had somewhat higher enzyme function, but there were also workers that never entered the tank farms and had elevated levels of liver enzyme function. The main result from the tests is there is nothing conclusive. The results do point out the need to do a better job of understanding peoples' employment history, rather than just their current job activities. There is a lot of medical information that could be used to better understand health effects at the tank farms. The panel recommended continuing to characterize the hazard and perform medical surveillance.

Tom Anderson, CHG – Director of Safety and Health, said CHG is interested in identifying all tank farm vapors. Tank head space sampling identified 1,500 chemicals. CHG developed methods for identifying those chemicals, and is working on identifying vapors in areas outside the tank farms. CHG sampled over 70 sites and are continuing to sample other areas. At exhaust stacks, CHG found eight chemical vapors registering above exposure limits. No chemical vapors were detected above 10% of exposure limits in samples taken five feet from breather filters and stacks. CHG is also concerned about chemical mixtures, and applies the Occupational Safety and Health Administration (OSHA) mixture rule to all identified chemicals. No chemical vapors were detected above 10% of exposure limits for chemical mixtures.

CHG policy requires anyone entering a vapor control zone to wear respiratory protection gear. Beyond vapor control zones people can enter tank farms without respiratory protection gear. Anyone who wants to can wear respiratory protection. This policy is working very well so far. The next step is to evaluate C Farm and S Farm. Next year CHG will evaluate V, U, and T farms.

Becky Holland, Hanford Atomic Metal Trades Council (HAMTC), provided a worker perspective on tank farm vapors and the toxicology panel. HAMTC has been involved in the panel in charge of discussing tank farm vapor issues and conducting processes to sample, analyze, and take workers off respiratory protection. A lot of work remains to be done, but she is happy with the work done to date. She expressed support for the removal of respirators from A Prefix Tank Farms, since some workers are discouraged by having to wear respirators. Some workers do not feel comfortable being in areas without respirators, for whom respiratory protection is available.

Committee Discussion

- *Since liver enzyme function fluctuates readily based on exposure to a variety of environmental conditions, is it really an effective test to determine occupational exposures to tank farm vapors?* Susan said the liver enzyme tests were based on evaluations of annual physicals, so part of the problem related to evaluating data collected for a different use. She emphasized the liver enzyme test results cannot be used as a fine indicator of anything. To help tank farm workers, Jim suggested time and energy should be focused on characterizing the vapors to get a better understanding of what they are being exposed to. Susan indicated that the health panel just performed a backwards look to identify any potential systematic problems.
- *Did the panel use state-of-the-art sampling?* Tom said the sampling was very complex, and several expert panels advised CHG on sampling methods and defining exposure limits. CHG also has expert panels to review sampling results.
- *Are tank emissions uniform, or are there “burps?”* Tom said there were no increases in tank emissions in the double shell tanks (DSTs), but increases do happen in the single shell tanks (SSTs). This is incorporated into the sampling design, so that samples are taken at times when tank emissions are likely to be at their highest.

Worker Compensation Claims Audit

Jean Vanek, State Labor & Industry (L&I) – Self Insurance Program Manager, presented information on the workers compensation claims process audit. There are two ways for employers to cover workers compensation: 1) pay premium to L&I, or 2) self insurance (employers apply and act as their own insurance for benefits). USDOE has been a member of the self-insurers group since 1990. L&I regulates the DOE compensation program to make sure it is administering programs according to Title 51.

Based on a request from the State of the Site (SOS) meeting in June of 2005, L&I managed an independent review of the DOE worker compensation program. After an unsuccessful initial request for proposal (RFP) process, L&I clarified the scope of work and redistributed the RFP, which was awarded to Miller & Miller, P.S. out of Seattle. The Audit Report was made final in March 2006, and results were shared in April 2006 at a public meeting in Richland.

The goals of the project were to: 1) review whether DOE was following legal requirements, and 2) determine areas to improve the workers compensation claims process. L&I authority over DOE is limited to the first goal. Contracts Claims Service, Inc. (CCSI) is purposely not mentioned in goals, since they operate as a third party administrator of Hanford’s Workers’ Compensation Program.

Audit activities included documenting full workers’ compensation process, reviewing and evaluating a statistically significant random sample of claims files, and interviewing injured workers. The audit evaluated 48 random claims (out of a possible 600 claims)

files from 2004, which provided a 95% confidence rate for the entire 2004 claims population. The audit did not go further back than 2004, since L&I and DOE have been making improvements and wanted to comment on the most current system. The audit intended to do 48 random worker interviews, but only completed 36 interviews with an additional 25 interviews of self-selected volunteer injured workers.

Conclusions of the audit include:

- DOE is operating under the legal requirements as a self-insured employer. However, the audit indicated more effective and timely communication and improved timeliness of claim progress to final resolution would be beneficial.
- Six out of 48 interviewees felt the worker compensation claims process was poor. (It was clear from the interview results that the self-selected group was less satisfied with the process than the randomly selected group).
- All workers (random and self-selected) want better communication and an improved working relationship with CCSI.
- The audit recommended that retirees and elderly should receive additional specialized assistance.

Jean discussed specific recommendations for L&I, DOE, and CCSI. The full report is available on the L&I website:

<http://www.lni.wa.gov/ClaimsIns/Insurance/SelfInsure/WhatsNew/>

Jean Schwier, DOE-RL, provided a DOE perspective on the audit and responses to the audit recommendations. CCSI, as third party administrator, makes decisions on state laws when cases are processed, but the state makes the final decision on claims.

Jean discussed the DOE actions since the SOS meeting. DOE followed-up with most of the people who expressed concerns at the meeting. DOE expressed frustration working with CCSI during the process; however, CCSI is doing everything DOE requested in their contract. Therefore, DOE needs to look at the contract structure and provide additional support to that contract if a decision is made to continue maintaining third party administration of the program. DOE's contract with CCSI ends at the end of Fiscal Year 2006, so DOE is considering all options for managing the workers compensation program.

Jean presented the recommendations from the L&I Performance Review of Hanford's Workers' Compensation Program, and provided DOE's responses to specific recommendations. She said there is a need to obtain feedback from employees to improve the processes, and DOE has to determine how to overcome bureaucratic issues and hurdles. DOE is committed to trying to integrate outreach and planning recommendations, but does not have responses to recommendations in a final plan yet.

Lea Mitchell, Government Accountability Project (GAP), presented information about GAP's survey of Hanford's Workers' Compensation Program. She commended L&I and DOE for coming to the committee to begin to address the issues. GAP was made aware of issues with the compensation program based on work done to consider workers claims

regarding tank farm vapors. GAP considers a worker compensation program a fundamental part of an adequate cleanup program. GAP started the review after the SOS meeting, on June 17, 2005. GAP shared its ideas with DOE about a scope for a review that could be performed, but never heard back from DOE. Although GAP supports the L&I review, it decided to conduct its own review as well. Differences between the reviews are a result of inherent differences in their scopes. GAP considered the program origins, the quality of oversight, the contracts themselves, and AdvanceMed Hanford's (AMH) contract. GAP used public records from L&I, DOE, and workers' records. Currently it is being reviewed internally.

The GAP review found that problems go beyond communications problems:

- Problems with how workers were treated at onsite medical facilities, including efforts to down-play injuries,
- Problems with the medical exam process, where IMEs were being used to deny claims. GAP is concerned about the 34% denial rate for self-insured claims, compared to a typical denial rate of 10%. There is no formal recommendation to address this in the L&I review.
- Need to reduce burden on workers to establish their claims files.
- Although L&I does the best they can with limited resources, there is a lack of oversight.

Lea indicated that fixing these problems will take the entire Hanford community working on the issues. GAP hopes to create a process to work together and identify visible benchmarks for a program using input from the community. The GAP review is scheduled for release by the end of May, with a public forum to discuss the review.

Committee Discussion

- *What percent of claims service dissatisfaction is dissatisfaction with service versus dissatisfaction with the timeliness of the claims process?* Lea said GAP is concerned that IMEs are used to deny a worker claim, rather than clarify a diagnosis. The state standard for IMEs should be used to assess workers' issues. In several cases, GAP found that workers' doctors did not have their records.
- Charlie commented that every self-insured employer has the incentive to deny a claim. He suggested the incentives should be changed, and wondered whether L&I could get enough resources to evaluate the claims that are being denied? Jean Vanek said it is difficult for a public agency to obtain additional resources. L&I has 16 claims managers to deal with a third of the state's claims.
- *What other incentives could be put in claims?* Lea suggested considering the fact that DOE contractors are indemnified for worker injuries. There also seem to be conflicting goals for CCSI, which is tasked with providing objective claims reviews and protecting DOE and contractor assets.
- Charlie commented that the ethical dilemma for a physician is difficult, since a physician should be a worker/patient advocate. Although many workers go through AMH, Jean Schwier said workers have the option to go to their physician of choice.

Charlie said he talked with a local physician, and there is no doubt they do not want to work with CCSI. This creates a concern about access to outside, independent physicians. Jean Vanek said L&I recognizes this is an issue, and is addressing the issue at the statewide context. Lea said workers have the right to see their own physicians, but they often unaware they have that right.

- *Are there any self-insured employers that have ombudsman?* Jean Vanek said she is not aware of any in the State of Washington.
- *Can any worker get referred for an IME?* Jean Vanek said a worker may request an IME and contact a claims manager at L&I, and L&I would issue an order that DOE needs to cover the worker's IME.

Committee Business

- The committee discussed potential topics for its next meeting:
 - Be program issues
 - Not a timely issue.
 - Charlie will serve as issue manager for Be issues. If the Beryllium Awareness Group indicates the process is deteriorating, then Charlie will alert the committee.
 - Tank vapors
 - Not a timely issue. The committee will wait for future work.
 - Becky will serve as issue manager for tank vapors.
 - Worker compensation
 - The committee will consider advising DOE not to develop its workers' compensation plan until it considers the GAP review report.
 - Keith will serve as issue manager for this topic.
 - Rob indicated that a recent OSHA report issued new requirements for respiratory protection for welding work, which may be an issue the committee is interested in tracking.
- The committee discussed public attendance at its meetings. It seems as though individuals might expect the committee and the Board to fix worker compensation issues, which is not in the purview of the committee or the Board.
- The committee decided a May committee call was unnecessary.
- The committee decided a June committee meeting is unnecessary.

Action Items / Commitments

There were no action items or commitments from the meeting.

Handouts

NOTE: Copies of meeting handouts can be obtained through the Hanford Advisory Board Administrator at (509) 942-1906, or tholm@enviroissues.com

- Chronic Beryllium Disease Prevention Program Requirements, DOE-RL, 5/11/2006.
- WCH Beryllium Program, Phillip Keuhlen, WCH, 5/11/2006.
- FH Beryllium Program, Davis Jackson, FH, 5/11/2006.
- Beryllium Awareness Group: Key Issues, Concerns and Problems, Beryllium Awareness Group, 5/11/2006.
- Performance Review of the Hanford Workers' Compensation Program, Jean Vanek, Washington State Department of Labor and Industries, 5/11/2006.
- Washington State Department of Labor and Industries Performance Review of Hanford's Workers' Compensation Program: Recommendations, Miller & Miller, P.S., date unknown.

Attendees

HAB Members and Alternates

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|-----------------|---------------|--|
| Gerald Dagle | Mike Priddy | |
| Rob Davis | Keith Smith | |
| Harold Heacock | John Stanfill | |
| Rebecca Holland | Jim Trombold | |
| Todd Martin | Charlie Weems | |
| Gerry Pollet | | |

Others

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|-----------------------|------------------------|-------------------------------------|
| Steve Chalk, DOE-RL | Beth Rochette, Ecology | Craig Hall, BAG |
| Joyce Gilbert, DOE-RL | | Steve Halterman, BAG |
| Jean Schwier, DOE-RL | | Tom Anderson, CHG |
| Doug Shoop, DOE-RL | | Karen Caddey, CHG |
| | | Susan Eberlein, CHG |
| | | Cathy McCague, EnviroIssues |
| | | Jason Mulvihill-Kuntz, EnviroIssues |
| | | Tom Young, FDH |
| | | David Jackson, FH |
| | | Elton Hewitt, FH |
| | | Tony Umek, FH |
| | | Steve Halterman, FH |
| | | Tom Carpenter, GAP |
| | | Lea Mitchell, GAP |
| | | Jean Vanek, L&I |
| | | Sharon Braswell, Nuvotec/ORP |
| | | Linda Goldiron, Public |
| | | Gai Oglesbee, Public |
| | | Lynette Bennett, WCH |
| | | Phil Keuhlen, WCH |